

Untitled document

**By Rep. Charles F. Bass, printed in the Keene Sentinel  
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Recently, outside special interest groups have started a campaign to tell seniors in New Hampshire that I voted to "end Medicare" and turn it into a "voucher" program.

Nothing could be further from the truth, and it is unfortunate that some are using political scare tactics to try and derail a debate before it has even begun. I want seniors to have the facts, and I am confident that we can have an honest discussion about how to protect the benefits of current Medicare enrollees and preserve the program for future generations.

I do not believe Medicare should be weakened, only strengthened. I believe Medicare is a valuable program that has benefited seniors tremendously since its creation in the 1960s. To that end, I will never support ending Medicare or turning it into a "voucher" program, which would merely give seniors a check and force them to fend for themselves to find health care coverage. I believe any Medicare proposal must have guaranteed coverage and safeguards to ensure seniors are getting the health care they have paid for and earned.

The debate needs to be based on facts, not the distortions of those who want to use the debate for political gain. Here are the facts: Medicare is a trust fund that collects receipts from the Medicare tax paid partially by employers and employees. Today, the program is paying out more money in benefits than it receives. Medicare is facing tremendous challenges as individuals are living longer, more people are retiring than ever before, and health care costs are rapidly rising. The Congressional Budget Office and the Medicare Trustees, both independent, nonpartisan groups, have forecasted that Medicare will be bankrupt within nine to 18 years, respectively.

There are basically four options for dealing with this situation: 1) Do nothing and hope for a miracle; 2) Raise taxes; 3) Reduce benefits; or 4) Reform the program so the seniors of tomorrow have the same access to care like the seniors of today. Recognizing that doing nothing is irresponsible, we need to be able discuss how to protect the current Medicare beneficiaries and strengthen the program so it is there for our children and grandchildren.

President Obama and the Democrats in Congress have already altered the future of Medicare through the passage of last year's health care bill. Under the law, Medicare funding will be reduced by \$575 billion over the next 10 years. That money will then be used to fund other programs instead of strengthening Medicare. To find savings, Medicare spending will be capped, and the health care law allows an unelected board of presidential appointees, called the Independent Payment Advisory Board, to determine what care seniors will be able to obtain and not obtain. Under this law, I am concerned that decisions on care are no longer solely preserved between the doctor and the patient and instead based on set spending caps.

I do not support the rationing of care or breaking down the doctor-patient relationship. Instead, we need ideas on how to move the program toward solvency for our children and grandchildren.

In the recent budget resolution that I supported, we have begun the discussion by providing suggestions on how to improve Medicare. While far from a final solution, this budget is the first step in a process that will and should lead to changes based on the input policymakers receive from their constituents and other stakeholders.

The options included in the budget include moving Medicare from a single-payer system that can only control costs by reducing benefits into a system (which would allow seniors to choose from multiple plans that meet strict criteria to ensure the necessary levels of service are provided). This would create choice and competition to lower costs without reducing benefits. Seniors' premiums would be paid directly by the government to the coverage provider, just as how employers pay their employees' premiums today. In addition, it would be income-adjusted, so that those that need more, like the poorer and sicker, would get more. Since this debate is about the future of the program, those already in the current Medicare system or those nearing retirement would see no change.

While politically it is never easy to have these debates, we shouldn't allow that to scare us from talking about the issue. The only thing scary about the debate is the thought of doing nothing. Not taking action is, quite simply, a lack of leadership.

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